		(Original Signature of Member)
116TH CONGRESS 2D SESSION	H.R.	

To provide for a study by the National Academies of Sciences, Engineering, and Medicine on the potential benefits on population health outcomes of incorporating into the Federal legislative process tools that measure the impacts of proposed legislation (including in areas outside of health care) on health and health disparities, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

Mr.	COX of California introduced	tne	rollowing	ЮШ;	wnich	was	referred	to	tne
	Committee on								

A BILL

- To provide for a study by the National Academies of Sciences, Engineering, and Medicine on the potential benefits on population health outcomes of incorporating into the Federal legislative process tools that measure the impacts of proposed legislation (including in areas outside of health care) on health and health disparities, and for other purposes.
 - 1 Be it enacted by the Senate and House of Representa-
 - 2 tives of the United States of America in Congress assembled,

1 SECTION 1. SHORT TITLE.

2	This Act may be cited as the "Assimilating Health
3	and Equity Assessments into Decision-making of 2020"
4	or "AHEAD Act of 2020".
5	SEC. 2. STUDY TO ASSESS THE VALUE OF USING TOOLS TO
6	MEASURE THE IMPACTS OF PROPOSED FED-
7	ERAL LEGISLATION ON HEALTH AND HEALTH
8	DISPARITIES.
9	(a) Study.—The Secretary of Health and Human
10	Services (in this section referred to as the "Secretary")
11	shall enter into an arrangement with the National Acad-
12	emies of Sciences, Engineering, and Medicine (or, if the
13	National Academies decline to enter into such arrange-
14	ment, with another appropriate entity such as the Na-
15	tional Academy of Public Administration) under which,
16	not later than 2 years after the date of enactment of this
17	Act, the National Academies (or other appropriate entity)
18	will complete a study—
19	(1) to examine the potential benefits on popu-
20	lation health outcomes of incorporating into the Fed-
21	eral legislative process tools that measure the im-
22	pacts of proposed legislation (including in areas out-
23	side of health care) on health and health disparities;
24	(2) to formulate recommendations on inte-
25	grating such tools into the Federal legislative proc-

1	ess to achieve better population health outcomes;
2	and
3	(3) in consultation with the Comptroller Gen-
4	eral of the United States, the Director of the Con-
5	gressional Budget Office, and the Director of the
6	Congressional Research Service, to formulate rec-
7	ommendations on how such tools should be incor-
8	porated into the Federal legislative drafting process.
9	(b) Tools to Be Considered.—The tools consid-
10	ered under the study under subsection (a) shall include
11	the following:
12	(1) Health impact assessments.
13	(2) Cost-benefit analyses.
14	(3) Cost-effectiveness analyses.
15	(4) Applied behavioral economics analyses, spe-
16	cific to public health.
17	(5) Any other tools that analyze the potential
18	impacts on health and health disparities of incor-
19	porating the findings of such reviews and analyses of
20	proposed Federal legislation and accompanying
21	budgetary scores.
22	(c) Specific Populations to Be Considered.—
23	The study under subsection (a) shall consider the impacts
24	described in such subsection on health and health dispari-
25	ties within specific populations including communities of

- 1 color, youth, women, older adults, sexual and gender mi-
- 2 norities, individuals living in rural and Tribal commu-
- 3 nities, individuals living in regions with persistent poverty,
- 4 individuals with co-morbid conditions, individuals with a
- 5 disability, and individuals involved with the criminal jus-
- 6 tice system.
- 7 (d) Report.—Not later than 2 years after the date
- 8 of enactment of this Act, the Secretary shall submit a re-
- 9 port to the Congress on the results of the study under
- 10 subsection (a).